



IN THE UNITED STATES ATENT AND TRADEMARK OFFICE

In re Patent Application of:

Hastings et al.

Application No.: 10/627,604

Filed: July 28, 2003

For: Human CCN-Like Growth Factor

Docket No.: PF185D1C2

Confirmation No.: 4279

Art Unit: 2176

Examiner: Not Yet Assigned

TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In accordance with the Notice entitled "Pre-Grant Publication Helpful Hint" published in the Official Gazette on October 9, 2001, the above identified application was filed with a new, clean-copy of the specification and claims incorporating amendments made during prosecution of the parent application (Application No. 09/853,625). As a convenience to assist the Examiner, please find enclosed a marked-up copy of the specification and claims showing the previous amendments incorporated into the present specification. Amendments in the marked-up copy are indicated by strikethrough showing text deleted and underlining showing text inserted.

Applicants believe that there are no fees due in connection with the filing of this submission. However, should a fee be due, please charge such fee to our Deposit Account No. 08-3425. A Fee Transmittal sheet (in duplicate) is attached.

Dated: June 29, 2004

Respectfully submitted,

Ielissa J. Pytel Registration No.: 41,512

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MJP/PF/ba

PTO/SB/17 (10-03)
Approved for use through 7/31/2006. OMB 0651-0032
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FEE TRANSMITTAL for FY 2004 Effective 10/01/2003. Patent fees are subject to annual revision.			Complete if Known						
							10/627,604-Conf. #4279		
							July 28, 2003		
						Gregg A. Hastings			
			Examiner Name				Not Yet Assigned		
Applicant claims small entity status. See 37 CFR 1.27			Art Unit				2176		
TOTAL AMOUNT OF PAYMENT (\$) 0.00			Attorney Docket No. PF185D1C2						
METHOD OF PAYMENT (check all that apply)	Γ	FEE CALCULATION (continued)							
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χ Deposit Account:									
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Account Name Human Genome Sciences, Inc.	1052	50	2052	25	-	e – late provision			
The Director is authorized to: (check all that apply)	1032	30	2002	23	sheet.				
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English specification				
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a request for ex parte reexamination				
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Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1,840*	1805	1,840*	D	action ng publication o	of SIR after		
FEE CALCULATION	1805 1251	110	2251	55	Examiner	action for reply within			
1. BASIC FILING FEE	1252	420	2252	210			n second month		
Large Entity Small Entity	1253	950	2253	475		for reply within			
Fee Fee Fee Fee Fee Description Fee Paid	1254	1,480	2254	740		for reply within			
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255	2,010	2255			for reply within		\vdash	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of		i iidi iioidi	\vdash	
1003 530 2003 265 Plant filing fee	1402	330	2402	165		ief in support o	of an appeal	$\vdash \vdash$	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	-	or oral hearing			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to	institute a pub	lic use proceeding		
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55	Petition to	revive – unav			
(4)	1453	1,330	2453	665	Petition to	revive - uninte			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issu	e fee (or reiss	ue)		
Claims below Fee Paid	1502	480	2502	240	Design iss				
Total Claims20** = x =	1503	640	2503	320		nt issue fee			
Independent Claims -3** = X = X	1460	130	1460	130		o the Commiss			
Multiple Dependent =	1807	50	1807	50		g fee under 37			
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Fee Fee Fee Fee Code (\$) Fee Description	8021	40	8021	40		rding each patent assignment per erty (times number of properties)			
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a su	submission after final rejection			
1201 86 2201 43 Independent claims in excess of 3					•	R 1.129(a)) ch additional invention to be			
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	examined	ned (37CFR 1.129(b))			
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	-	Request for Continued Examination (RCE) Request for expedited examination			
1205 18 2205 9 ** Reissue claims in excess of 20	1802					n application			
and over original patent	Other	Other fee (specify)							
SUBTOTAL (2) (\$) 0.00 *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00									
**or number previously paid, if greater; For Reissues, see above									
SUBMITTED BY (Complete (if applicable))									
Name (Print/Type) Melissa J. Pytel	Registration No. (Attorney/Agent) 41,512					Telephone	(301) 610-5764		
Signature						Date	lune 29, 2004		